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Dated: February 5, 2004

Ingrid Foerster, Esq.
IBM Corporation
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San Jose, CA 95141

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FEB 13 2004

Technology Center 2100

DOCUMENT TRANSMITTAL LETTER

Serial No: 09/820,451	Filing Date: 3/28/2001
Your Reference No.: SVL920010001US1	Our Reference No.: 2061P
Title: Method and System for Providing A Generic Scalar Function	

The following correspondence is enclosed for your files:

DOCUMENTS

- | | |
|---|--|
| <input type="checkbox"/> Advisory Action | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Amendment/Response | <input type="checkbox"/> Notice of Allowance dated |
| <input type="checkbox"/> Appeal Brief | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Assignment Recordation | <input type="checkbox"/> Notice of Publication |
| <input type="checkbox"/> Drawing(s) ___ sheets | <input type="checkbox"/> Office Action dated |
| <input type="checkbox"/> Filing Receipt | <input type="checkbox"/> Final Office Action dated |
| <input checked="" type="checkbox"/> IDS and PTO Form 1449 | <input type="checkbox"/> Petition for Extension of Time |
| <input type="checkbox"/> Reference Copies | <input type="checkbox"/> Preliminary Amendment |
| <input type="checkbox"/> Issue Notification | <input type="checkbox"/> Reply Brief |
|
<input type="checkbox"/> Patent Application | |
| <input type="checkbox"/> Utility | <input type="checkbox"/> Divisional |
| <input type="checkbox"/> RCE | <input type="checkbox"/> Continuation |
| <input type="checkbox"/> CIP | <input type="checkbox"/> Design |
|
<input type="checkbox"/> Issued Patent | |
| <input type="checkbox"/> Original Patent | <input type="checkbox"/> Request for Certificate of Correction |
| <input type="checkbox"/> ___ Copies of Patent | <input type="checkbox"/> Fee Address Indication Form |
| <input type="checkbox"/> Certificate of Correction | <input type="checkbox"/> Change of Correspondence Address |
|
<input type="checkbox"/> Other | |

Submitted by: Jackie Tanda

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#9
SP
2/17-04

TRANSMITTAL FORM	Attorney Docket No. SVL920010001US1/2061P
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In re the application **Jason A. CU et al.**

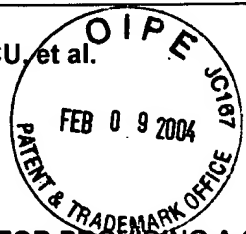
Confirmation No: **6671**

Serial No: **09/820,451**

Group Art Unit: **2171**

Filed: **March 28, 2001**

Examiner: **Chen, Te Y.**



For: **METHOD AND SYSTEM FOR PROVIDING A GENERIC SCALAR FUNCTION**

ENCLOSURES (check all that apply)					
<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below)
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	<div style="border: 1px solid black; padding: 5px;"> RECEIVED FEB 13 2004 Technology Center 2100 </div>	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

CLAIMS					
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	0	0	0	\$18.00	\$ 0.00
Independent Claims	0	0	0	\$86.00	\$ 0.00
				Total Fees	\$ 0.00
METHOD OF PAYMENT					
<input checked="" type="checkbox"/>	Check no. <u>7005</u> in the amount of \$ <u>180.00</u> is enclosed for payment of IDS submission fee.				
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.				
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. <u>02-2120</u> (Sawyer Law Group LLP)				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	February 5, 2004
CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: February 5, 2004	
Type or printed name	Grace Alicea
Signature	

